

**FORM TO BE USED BY A PRISONER IN FILING A CIVIL RIGHTS COMPLAINT**

**IN THE UNITED STATES DISTRICT COURT**  
**FOR THE MIDDLE DISTRICT OF PENNSYLVANIA**

LT5467

(Inmate Number)

Mario Medina

(Name of Plaintiff)

S.C.I. Forest P.O. Box 945

(Address of Plaintiff)

Marionville, PA 1639

(Case Number)

vs.

**COMPLAINT**C.O. Snowberger, I.T. John Doe #1C.O. John Doe #1 C.D. John Doe #2, D.O.C.S.C.I. Benner Health Care Provider Casner(Names of Defendants) TOM WOLF, WENZELFILED  
SCRANTON

MAY 14 2020

PER

S/ DEPUTY CLERK

TO BE FILED UNDER:  42 U.S.C. § 1983 - STATE OFFICIALS 28 U.S.C. § 1331 - FEDERAL OFFICIALS**I. Previous Lawsuits**

- A. If you have filed any other lawsuits in federal court while a prisoner please list the caption and case number including year, as well as the name of the judicial officer to whom it was assigned:

N/A**II. Exhaustion of Administrative Remedies**

- A. Is there a grievance procedure available at your institution?

 Yes  No

- B. Have you filed a grievance concerning the facts relating to this complaint?

 Yes  No

If your answer is no, explain why not \_\_\_\_\_

- C. Is the grievance process completed?  Yes  No

- (b) Please explain in detail why you are under imminent danger of serious physical injury:

The ATTACK WAS DONE BY Correctional officers of the Department of Corrections. I am a target by those officers and its on my record of the abuse and Grievance and threat is on each other side.

4. (a) Are you presently employed at the Institution? Yes \_\_\_\_\_ No
- (b) If yes, what is your monthly compensation? \$ N/A
5. Do you own any cash or other property; have a bank account; or receive money from any source? Yes \_\_\_\_\_ No

If the answer is "yes" to any of the above, describe each source and the amount involved.

N/A

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I certify under penalty of perjury that the foregoing is true and correct.

Executed on 5-5-20  
(Date)

Mario Medina  
(Signature of Plaintiff)

This certification is executed pursuant to Title 28, United States Code, Section 1746.

### III. Defendants

(In Item A below, place the full name of the defendant in the first blank, his/her official position in the second blank, and his/her place of employment in the third blank. Use Item B for the names, positions and places of employment of any additional defendants.)

- A. Defendant C.O. Snowberger is employed  
as C.O. Correctional Officer at S.C.I. Benner 301 institution Drive
- B. Additional defendants L.T. John Doe of RHO #1 C.O. Hammer / LT. SHILING  
Counselor Casner / Unit Manager Rupert / PRC Department / Warden  
Facility Manager of S.C.I. Benner, SEC WENTZEL, GON. TOM WOLF  
CAMP HILL EASTERN DIVISION

### IV. Statement of Claim

(State here as briefly as possible the facts of your case. Describe how each defendant is involved, including dates and places. Do not give any legal arguments or cite any cases or statutes. Attach extra sheets if necessary.)

1. Correctional Officer Snowberger sprayed me with O.C. during Dinner on June 13 2018. In which he tried to do it discretely and Sneaky while Serving dinner but also sprayed himself and locked the food slot. D.O.C. was notified and covered up the Assault.
2. On June 13 Friday 2018 around 5:30 pm - 6:30 pm I called bubble officer #1 John Doe Correctional Officer to inform him I was sprayed with O.C. but was not paid any attention and I had to keep ringing the cell bell to get #1 John Doe C.O. Attention.
3. L.T. SHILING OF Second SHIFT of the RHO had threatened me to sign off on 2 Grievance or I was going to receive alot of abuse and unwanted Attention. I ALSO wrote numerous request to the Warden, PRC, my Counselor of my Attack.

On Friday June 18, 2018 I was assaulted by Corrections Officer Sandoval  
while he was running dinner around 5:30 pm - 6:30 pm. While my slot was  
open he tried to push my tray in the slot and called my name so  
he can deliberately spray O.C. in my face and on my food. After sprays  
myself and getting himself due to the tray back him some O.C. spray  
towards his face he locked and secured the food slot and left me to  
sit in O.C. and a Goldmanized cell. I began to hit the buzzard bell to  
call the C.O. in the bubble to let them know I got sprayed and to alert  
I was喷漆 to a noise area to clean my eyes and evaluate my eyes.  
At this time the L.T SHILLING and other C.O.'s promised to get me  
cleaned and then the trays began a couple days later so I can  
shut off and if I didn't I would not receive any of my commissary  
nor I wouldn't be able to eat out my cell for like 14 days and incarceration  
I dealt with all this and I left my Concourse and Unit Manager  
know especially the P.R.C form So I can be transferred to STGMU.  
Note in 2018 the mail system and all inmate and Appeals were  
not being held accountable due to the state wide lock down.

L75407

MARIO MEDINA

5-5-80

V. Relief

(State briefly exactly what you want the court to do for you. Make no legal arguments. Cite no cases or statutes.)

1. I Seek Compensation OF \$ 75,000.00  
Seventy thousands dollars For pain and suffering  
mental and physical Abuse.
2. All FINES and Cost , Court and Attorney  
bills paid.
3. \_\_\_\_\_

Signed this 5-5-20 day of Tuesday, May 5, 2020.

Mario Medina  
(Signature of Plaintiff)

I declare under penalty of perjury that the foregoing is true and correct.

5-5-20  
(Date)

Mario Medina  
(Signature of Plaintiff)

EXHIBIT # 1

I inmate Cochran GB5952 witnessed T.J. Snowburger C spray inmate Medina LT5467 with pepper spray threw the tray slot inbetween 5:30 and 6:00 during tray pick up. It was wensday the 13<sup>th</sup> of June. After spraying him he left him in the cell for about 1 and half hour befor coming to check up on him. These are true facts based on my eye witnesssing this happen.

Willian Cochran

It occurred in Cell JA 230

GB 5952

JA 124

Willian Cochran



## EXHIBIT #2

(W)

**TO** Mario Medina, LT5467  
SCI Greene  
*CH*

**FROM** Charles Hensley  
Staff Assistant, Eastern Region

**DATE** July 30, 2018

**RE** Correspondence

This is in response to your July 18, 2018 correspondence addressed to Executive Deputy Secretary Moore Smeal in reference to being retaliated against after some negative interactions you had with staff and inmates at Benner Township. Your correspondence has been referred to me for review and response.

Mr. Medina, I have reviewed and investigated your complaints. Your concerns indicate that staff at SCI-Benner Township is retaliating against you. You have filed a grievance in regards to this concern. Please be advised that this office will not interfere with the DC ADM 804 (grievance policy). You need to follow this policy and file appeals as required.

Your record indicates that you were involved in several instances of negative, gang related activities at SCI-Benner Township. As a result, you were returned to the Security Threat Group Management Unit at SCI-Greene. I trust you will actively participate in the programming and cease your gang related activities.

By copy of your letter and this response, SCI Benner Township and SCI Greene Administrative staff are being notified of your concerns.

/ch

cc:  
Superintendent Gilmore  
Superintendent Marsh  
carlking #2018-C42-000000053  
File

J.A. 2030.01EXHIBIT #3

Form DC-135A

**INMATE'S REQUEST TO STAFF MEMBER**Facility Grievance Coordinator

1. To: (Name and Title of Officer)

3. By: (Print Inmate Name and Number)

Mario Medina LTS#67Mario Medina

Inmate Signature

6. Work Assignment:

N/A

8. Subject: State your request completely but briefly. Give details.

I was forced to Sign off on a grievance I put in on Friday 13, 2018 around 6:00 - 7:00 pm So I can receive my Commissary. I was told if I didn't sign off I wouldn't get my stuff and would pay ~~the~~ for my Actions.

Commonwealth of Pennsylvania  
Department of Corrections**INSTRUCTIONS**

Complete items number 1-8. If you follow instructions in preparing your request, it can be responded to more promptly and intelligently.

2. Date:

7-13-18

4. Counselor's Name:

Mr. Casner

5. Unit Manager's Name:

Ms. Ruppert

7. Housing Assignment:

JA-030**RECEIVED**

JUL 17 2018

CSA Office

ATTorney

CC: Ms. Melissa Montgomery

Centre County D.A.

Facility Grievance Coordinator

9. Response: (This Section for Staff Response Only)

Medina

THIS OFFICE HAS NOT RECEIVED A GRIEVANCE FROM YOU THAT WAS DATED 7/13/18. THE LAST GRIEVANCE WE RECEIVED FROM YOU WAS ON 7/11/18, AND IT WAS REJECTED FOR LACK OF DOCUMENTATION.

Therefore, it is impossible that you have been forced to "sign off" on a grievance from 7/13/18.

 To DC-14 CAR only To DC-14 CAR and DC-15 IRS

STAFF MEMBER NAME

L. Hughes

Print

L. Hughes

Signature

DATE 7/17/18

County of Centre

EXHIBIT #4



COMMONWEALTH OF PENNSYLVANIA  
OFFICE OF THE DISTRICT ATTORNEY

**MARK S. SMITH**  
First Assistant District Attorney

**SEAN P. MCGRAW**  
Deputy District Attorney

**BERNIE CANTORNA**  
District Attorney

Courthouse Annex, Room 302  
106 East High Street  
Bellefonte, PA 16823  
Telephone (814) 355-6735  
Victim/Witness (814) 548-1107

July 27, 2018

Mario Medina # LT5467  
SCI Greene  
169 Progress Dr.  
Wayneburg, PA 15370

RE: Filing of Private Criminal Complaint

Dear Mario:

I am in receipt of your letter dated June 14, 2018 wherein you allege that you were assaulted on June 13, 2018 and you state that you would like to file a Private Criminal Complaint. I have enclosed a Private Criminal Complaint form that must be completed and returned at your earliest possible convenience. It will need to include the names of the persons who assaulted you, the specific crimes you allege were committed, and the details of the assault.

Since the Centre County District Attorney's Office does not have a County Detective, I am referring your letter to the Office of Special Investigations and Intelligence located within the Pennsylvania Department of Corrections for an investigation. I will notify you when the investigation is complete.

Sincerely,

A handwritten signature in black ink, appearing to read "Mark S. Smith".

Mark S. Smith, Esquire  
First Assistant District Attorney

MSS/mss

County of Centre

EXHIBIT # 5.



COMMONWEALTH OF PENNSYLVANIA  
OFFICE OF THE DISTRICT ATTORNEY

**MARK S. SMITH**  
First Assistant District Attorney

**SEAN P. MCGRAW**  
Deputy District Attorney

**BERNIE CANTORNA**  
District Attorney

Courthouse Annex, Room 302  
106 East High Street  
Bellefonte, PA 16823  
Telephone (814) 355-6735  
Victim/Witness (814) 548-1107

August 15, 2018

Mario Medina #LT5467  
SCI Greene  
169 Progress Dr.  
Wayneburg, PA 15370

Re: Mario Medina #LT5467 v C O Snowberger

Dear Mario:

I am in receipt of your Private Criminal Complaint wherein you allege that C. O. Snowberger assaulted you on July 18, 2018 while you were celled at SCI-Benner Township..

Since the Centre County District Attorney's Office does not have a County Detective, I have referred this matter to the Office of Special Investigations and Intelligence located within the Pennsylvania Department of Corrections for an investigation. I will notify you when the investigation is complete.

Sincerely,

A handwritten signature in black ink, appearing to read "Mark S. Smith". Below the signature, the name is typed in a standard font.

Mark S. Smith, Esquire  
First Assistant District Attorney

MSS/mss

INMATE  
MAIL

neopost<sup>®</sup>  
05/12/2020  
US POSTAGE

FIRST-CLASS MAIL

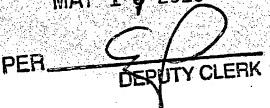
\$001.60<sup>00</sup>  
  
ZIP 16239  
041M12251506

MARIO MEDINA LT5467  
S.C.I. FOREST  
P.O. BOX 307  
MARIETTLE, PA. 16239

Medina G. Oyle  
JD1010

RECEIVED  
SCRANTON

MAY 1<sup>st</sup> 2020

PER   
DEPUTY CLERK

U.S. DISTRICT COURT, MIDDLE DISTRICT OF PENNSYLVANIA  
William J. NEALON FEDERAL BUILDING & U.S. Courthouse  
235 N. WASHINGTON AVE. P.O. BOX 1148  
Scranton, P.A. 18501

